

				<div>Close</div>						
TIP SOURCE		Log Year	2010	Log ID	CE-100	Tip Source:	Voice Mail - Tipline	If Other, Describe		
		Date Tip Received	5/3/2010	Time Tip Received	12:00 AM	Date Data Entered		5/3/2010		
TIP SUBMITTER		First Name	Ex. 6 - Personal Privacy		Last Name	Ex. 6 - Personal Privacy				
		Phone	Ex. 6 - Personal Privacy		Alternate Phone	Ex. 6 - Personal Privacy				
		Street Address				Address Line 2				
		City	demic			State	pa	Zipcode		
		Email								
		Permission to Release Submitter Name to State/Local Govt ?				<input checked="" type="checkbox"/>				
		Permission to Notify State ?				<input checked="" type="checkbox"/>				
		Submitter Notified Other Agencies				PADEP				
ALLEGATION		Nature of Complaint	dumping frack waer on her road				Release Occurred/Occurring ?			<input type="checkbox"/>
		Incident Type			If Other, Describe					
		Individual/Company	unknown possibly Cabat							
		Incident Date	5/1/2010	Approximate Timeframe				Activity Ongoing ?		<input type="checkbox"/>
INCIDENT LOCATION		Street Address				Address Line 2				
		City				State		Zipcode		
		County				Latitude			Longitude	
INCIDENT DETAILS		Incident Description	<div>caller advised that she was walking her dog when a truck passed her slowly while dumping a liquid on the road. Te material was foamy and had an odor. Caller copied truck plate BA58997 PA. Neighbor chase down the truck and asked the driver what he was doing driver replied that he was wetting down a dusty road.</div>							
POLLUTANTS		Possible Pollutants								
OTHER INCIDENTS		Related to Other Incident(s) ?		<input type="checkbox"/>						
		Other Incident(s)								
WPD		Forward to WPD ?	<input checked="" type="checkbox"/>		WPD Date Forward	5/4/2010				
		WPD First Name	martin		WPD Last Name	Harrell				
		WPD Phone			WPD Email					
APD		Forward to APD ?	<input type="checkbox"/>		APD Date Forward					
		APD First Name			APD Last Name					
		APD Phone			APD Email					
OECEJ		Forward to OECEJ ?	<input type="checkbox"/>		OECEJ Date Forward					
		OECEJ First Name			OECEJ Last Name					
		OECEJ Phone			OECEJ Email					
HSCD		Forward to HSCD ?	<input type="checkbox"/>		HSCD Date Forward					
		HSCD First Name			HSCD Last Name					
		HSCD Phone			HSCD Email					
OTHER REGION		Forward to Other Region ?	<input type="checkbox"/>		Other Region Date			Other Region		
		Other Reg First Name			Other Reg Last Name					
		Other Reg Phone			Other Reg Email					
NATIONAL RESPONSE CENTER		Forward to NRC?	<input type="checkbox"/>		NRC Date Forward					
		NRC First Name			NRC Last Name					
		NRC Phone			NRC Email					
STATE		Forward to State ?	<input type="checkbox"/>		State Date Forward			State Agency		
		State First Name			State Last Name					
		State Phone			State Email					
OTHER		Forward to Other ?	<input type="checkbox"/>		Other Date Forward			Other Agency		
		Other First Name			Other Last Name					
		Other Phone			Other Email					
OSCR		OSCR Notified ?	<input type="checkbox"/>		OSCR Date Notified					
		OSCR First Name			OSCR Last Name					
		OSCR Phone			OSCR Email					
RESOLUTION		Resolution Date			First Name			Last Name		
		Resolution Description								
				<div>Close</div>						